

# BEST AVAILABLE COPY

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

06530-0279

### CLAIMS AS FILED - PART I

|   | (Column 1)    | (Column 2)   |
|---|---------------|--------------|
| TOTAL CLAIMS  | 36            |              |
| FOR   | NUMBER FILED  | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | 36 minus 20 = | 16           |
| INDEPENDENT CLAIMS  | 5 minus 3 =   | 2            |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |               |              |

SMALL ENTITY  
TYPE ☐

OR  
OTHER THAN  
SMALL ENTITY

| SMALL ENTITY TYPE | OTHER THAN SMALL ENTITY |
|-------------------|-------------------------|
| RATE FEE          | RATE FEE                |
| BASIC FEE 355.00  | BASIC FEE 710.00        |
| X\$ 9=            | X\$18= 288              |
| X40=              | X80= 160                |
| +135=             | +270=                   |
| TOTAL             | TOTAL 1156              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

### CLAIMS AS AMENDED - PART II

|             | (Column 1)  | (Column 2)                         | (Column 3)    |
|-------------|---|------------------------------------|---------------|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT  | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total *   | Minus **                           | =             |
|             | Ind pendent *   | Minus ***                          | =             |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                    |               |

SMALL ENTITY OR OTHER THAN SMALL ENTITY

| SMALL ENTITY        | OTHER THAN SMALL ENTITY |
|---------------------|-------------------------|
| RATE ADDITIONAL FEE | RATE ADDITIONAL FEE     |
| X\$ 9=              | X\$18=                  |
| X40=                | X80=                    |
| +135=               | +270=                   |
| TOTAL ADDIT. FEE    | TOTAL ADDIT. FEE        |

|             | (Column 1)  | (Column 2)                         | (Column 3)    |
|-------------|---|------------------------------------|---------------|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT  | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total *   | Minus **                           | =             |
|             | Independent *   | Minus ***                          | =             |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                    |               |

| SMALL ENTITY        | OTHER THAN SMALL ENTITY |
|---------------------|-------------------------|
| RATE ADDITIONAL FEE | RATE ADDITIONAL FEE     |
| X\$ 9=              | X\$18=                  |
| X40=                | X80=                    |
| +135=               | +270=                   |
| TOTAL ADDIT. FEE    | TOTAL ADDIT. FEE        |

|             | (Column 1)  | (Column 2)                         | (Column 3)    |
|-------------|---|------------------------------------|---------------|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT  | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total *   | Minus **                           | =             |
|             | Independent *   | Minus ***                          | =             |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                    |               |

| SMALL ENTITY        | OTHER THAN SMALL ENTITY |
|---------------------|-------------------------|
| RATE ADDITIONAL FEE | RATE ADDITIONAL FEE     |
| X\$ 9=              | X\$18=                  |
| X40=                | X80=                    |
| +135=               | +270=                   |
| TOTAL ADDIT. FEE    | TOTAL ADDIT. FEE        |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.